PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)				Docket Number 430156.404USPC		
FY 2009				30156.	404USPC	
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) Application Number 10/535,312				iled .lı	une 5, 2006	
	METHOD FOR THE MASS PRODUCTION OF	E IMMUNOGI OF			-	
Art Unit				xamine		
1643				Lynn Anne Bristol		
	his is a request under the provisions of 37 CFF oply in the above identified application.	R 1.136(a) to ext	end the peri	od for fi	ling a	
	he requested extension and fee are as follows be below):	(check time per	iod desired a	and ente	er the appropriate	
	,	<u>Fee</u>	Small E	ntity Fe	<u>e</u>	
	One month (37 CFR 1.17(a)(1))	\$130	\$6	55	\$ <u>130</u>	
	Two months (37 CFR 1.17(a)(2))	\$490	\$2	45	\$	
	Three months (37 CFR 1.17(a)(3))	\$1110	\$5	55	\$	
	Four months (37 CFR 1.17(a)(4))	\$1730	\$8	65	\$	
	Five months (37 CFR 1.17(a)(5))	\$2350	\$11	75	\$	
П	Applicant claims small entity status. See 37 CFR 1.27.					
П	A check in the amount of the fee is enclosed.					
	Payment by credit card.					
	The Director has already been authorized to charge fees in this application to a Deposit Account.					
X	The Director is hereby authorized to charge the above fees, or credit any overpayment,					
	to Deposit Account Number 19-1090.					
	WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
La	am the applicant/inventor.					
assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).						
	☑ attorney or agent of record. Registration No. 44.614					
	attorney or agent under 37 CFR 1.34.					
	Registration number if acting under 37 CFR 1.34					
	/William T. Christiansen/			August	31, 2009	
	Signature			Date	9	
	William T. Christiansen, Ph.D.	_	2	06-622-	4900	
	Typed or printed name	_	Teleph	one Nu	mber	
иот	E: Signatures of all the inventors or assignees of re-	cord of the entire in	nterest or their	represe	ntative(s) are required	

Submit multiple forms if more than one signature is required.

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.